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## BIB DATA SHEET

CONFIRMATION NO. 1755

<b>SERIAL NUMBER</b> 10/542,413	<b>FILING or 371(c) DATE</b> 12/01/2005 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3774	<b>ATTORNEY DOCKET NO.</b> 6612-4000		
<b>APPLICANTS</b> Michael Lococo, Niagara Falls, CANADA; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/CA04/00016 01/06/2004 <b>** FOREIGN APPLICATIONS *****</b> CANADA 2416348 01/14/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b>						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/Ann Schillinger/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWINGS</b> 14	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> WINSTON & STRAWN LLP PATENT DEPARTMENT 1700 K STREET, N.W. WASHINGTON, DC 20006 UNITED STATES						
<b>TITLE</b> BONE IMPLANT AND DEVICE FOR FORMING A SOCKET FOR SAME						
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			